Robert Kenneth Harris 909 Patton Lane Westwego, LA 70094 1(504)975-8644

15 October 2015

Re: Residential Capitol LLC, et al,

Debtors

Case No. 12-12020(MG)

Chapter 11

Jointly Administered

(REDCAP BORROWER CLAIMS TRUST'S EIGHTY-NINTH IMNIBUS OBJECTION TO CLAIMS (1) NO LIABILITY BORROWER CLAIMS AND (2) REDUCE AND ALLOW BORROWER CLAIMS)

Robert Kenneth Harris Opposed

RECEIVED

OCT 23 2015

Ref: Claim #1 1689

Claim #2 1687

U.S. BANKRUPTCY COURT, SDNY

I, Robert Kenneth Harris, do hereby whole heartily (oppose) the Reduction and Allowance of "claims" listed under the Proposed Claims to be Reduced and Allowed for the reasons listed as a result of their OCWEN underhanded tactics to secure my property I was forced to mortgage a piece of property (Exhibit A). My mortgage payment was changed on two occasion from a regular payment of \$855.36 to \$1410.94 and again to \$2422.13 (Exhibit B & C); additional information can be supplies if requested. My credit which I enjoyed and cherished as an American has been literally destroyed by causing my Credit Score to fall from a 610 rating to a 498 rating (Exhibit D).

As a last ditched attempt to have my claims expunged, they (debtors) for OCWEN Loan Servicing have asked me to itemize the cost of their attorney Mr. Dean Morris, L.L.P., 1505 North 19th Street, Monroe, LA 71201; which was retained by GMAC to initiate the foreclosure proceedings against me. Only Mr. Dean Morris can do this.

Finally, OCWEN illegally damaged my credit rating which resulted in losing my credit availability. After viewing all the information that have been presented against OCWEN Loan Servicing I pray that OCWEN Loan Servicing be unlawfully found at fault for their attempt to foreclose on my property and be forced to pay restitution in the amount of \$240,000.00 for Case No. 12-12020(MG) Claim #1689.

Respectfully submitted,

Mr. Robert K. Harris

RKH/la

Attachments

B 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	286 Filed 10/23/15 Ente COURT FOR THE SOLTHERN	red 10/26/15 16:00:28 Main Doo	PROOF OF CLAIM
Name of Debtor:	COURT FOR THE SQLOG SPALS	Case Number:	PROOF OF CLAIR
5 m AC Meltoner (6 & 12-12032 (M) 6)			
NOTE: This form should not be used to make a claim for an edinivistfative expense (other than a claim asserted under 11 U.S.C. § 503(b)(9)) arising after the commencement case. A "request" for payment of an administrative expense (other than a claim asserted under 11 U.S.C. § 503(b)(9)) may be filed pursuant to 11 U.S.C. § 503.			
Name of Creditor (the person or other entity to whom the debtor owes money or property): Name and address where notices should be sent:			Check this box if this cla amends a previously file claim.
909 PATTON St.			Court Claim Number:
WEST wego, La, Joogy			Filed on: Check this box if you are
Telephone number: 504-975-8644 email: Name and address where payment should be sent (if different from above):			that anyone else has filed a pof claim relating to this clair Attach copy of statement give particulars.
			5. Amount of Claim Enti- Priority under 11 U.S.C.
Telephone number: email:			\$507(a). If any part of the
1. Amount of Claim as of Date Case Filed; \$			falls into one of the follow categories, check the box
If all or part of the claim is secured, complete item 4.			specifying the priority an
If all or part of the claim is entitled to priority, complete item 5. Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes			①Domestic support obliga
interest or charges.			under 11 U.S.C.
2. Basis for Claim: flff f b Graf f VO b (See instruction #2)			\$507(a)(1)(A) or (a)(1)(Wages, salaries, or
Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as:	3b. Uniform Claim Identifier (optional):	commissions (up to \$11 earned within 180 days the case was filed or the
6.268	(See instruction #3a)	(See instruction #3b)	debtor's business ceased whichever is earlier - 11
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.			U.S.C. \$507 (a)(4). Contributions to an employ benefit plan -11 U.S.C. §4 (a)(5).
Nature of property or right of setoff: Real Estate OMotor Vehicle OOther Describe:			Up to \$2,600 of deposi
Value of Property: \$ Annual Interest Rate % ①Fixed ①Variable (when case was filed)			rental of property or ser- for personal, family, or
Amount of arrearage and other charges, as of the time case was filed, included in secured claim,			household use - 11 U.S.
if any: \$ Basis for perfection:			§507 (a)(7). ☐ Taxes or penalties owed
Amount of Secured Claim: \$ Amount Unsecured: \$		governmental units – 11 §507 (a)(8)	
6. Claim Pursuant to 11 U.S.C. § 503(b)(9): Indicate the amount of your claim arising from the value of any goods received by the Debtor within 20 days before May 14, 2012, the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim. \$ (See instruction #6)			Other - Specify applical paragraph of 11 U.S.C. (a)(). Amount confided to price
7. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #7)			
8. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #8, and the definition of "redacted".)			* Amounts are subject to adjustment on 4/1/13 an
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.			3 years thereafter with r
If the documents are not available, please explain:			to cases commenced on after the date of adjustm
9. Signature: (See instruction #9) Check the appropriate box.			
Mam the creditor.			
I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief			
Print Name: Albert Mean ville 18. Henry Lette 10/23/12			
Company: (Signature) (Date)			
Address and telephone number (if different from notice address above):			
Talanhara gumhar			COURT USE ONL